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PATENT APPLICATION FEE DETERMINATION RECORD									ess it displays a valid OMB control number Application or Docket Number		
Substitute for Form PTO-875									10/05088		
CLAIMS AS FILED - PART ((Column 1) (Column 2) SMALL ENTITY									OR	OTHER THAN SMALL ENTITY	
FOR NUMBER FILED				NUM	NUMBER EXTRA			7		1	
BASIC FEE (97 CFR 1.16(a))							RATE	FEE	1	RATE	FEE
TOTAL CLAIMS					 1 ·		 	- t	OR	<u> </u>	\$
	DEPENDENT CLA	IMS		minus 2	50 = 1		X \$=		OR	X \$=	
(37 CFR £18(b)) minus 9 = *							X \$=		OR	x \$=	
MULTIPLE DEPENDENT CLAIM PRESENT (37 CFR 1.16(d))							+5=		OR	+: =	
•#	* If the difference in column 1 is less than zero, enter "0" in column 2.								OR	TOTAL	
6	1/1/	LAIMS	S AS AM	ENDEC	PART IF						
0	1100	(Column 1) (Column 2) (Column 3)					SMALL	ENTITY	OR	OTHE	RTHAN
AMENDMENT A		REA A	LAIMS MAINING FTER		HIGHEST NUMBER PREVIOUSLY	PRESENT EXTRA	RATE	ADDI- / TIONAL		RATE	ADDL
M	Total	AWIE	NDMENT	Minus	PAID FOR	=	 	FEE			TIONAL
2	(37 CFR 1.16(c)) Independent	-	<u>-W</u>	Minus	2-0	ļ	x s=		OR	x s=	
ME	(37 CFR 1.16(b))			minus		=	x s/ =		OR	X \$ _=	
₹	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d))						<i>f</i> : =		OR	7	
							TOTAL ADO'L FEE		OR	TOTAL ADD'L FEE	
		(Colu	ımn 1)		(Column 2)	(Column 3)			, 0,,	ADD L FEE	
AMENDMENT B			AIMS AINING		HIGHEST						
		AF	TER IDMENT	*	. NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA	RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL
	Total (37 CFR 1.18(c))		- 1	Minus	••	=	X \$_ =				FEE
	Independent (37 CFR 1.16(b))	•		Minus	***	=			OR	X \$=	
₹	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d))						X \$=		OR	X \$=	
			-			(4)//	TOTAL		OR	+ \$=	
							ADD'L FEE		OR	TOTAL ADD'L FEE	
			mn 1) AIMS		(Column 2)	(Column 3)					
AMENDMENT C		REM/ AF	AINING TER DMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA	RATE	ADDI- TIONAL		RATE	ADDI- TIONAL
	Total (37 CFR 1.16(c))	•		Minus	**	=	X \$_ =	FEE			FEE
	Independent (37 CFR 1.18(b))	*		Minus	***	=	X \$=		OR	X \$=	
F	FIRST PRESENTATION OF MULTIPLE DEPENDENT: CLAIM (37 CFR 1.16(d))						+\$=		OR	X \$=	
TOTAL									OR	+ \$_ =	
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3. ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20". The "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3".											
م ما							er "3". I number found in t	ha anneoneista	havin an	h	}

This collection of information is required by 37 CFR 1.16. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS, SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.